

Activities	Responsible Party, Lead	Outcome	Completion Date
PART I: COMMUNICATION			
1) Improve communication between the Center for Multicultural Health (CMH) and the Utah Department of Health (UDOH).			
a) Create the Center for Multicultural Health website and listserv.	CMH, April		
i) Create a section of the Center for Multicultural Health website in which people may submit written requests for training or technical assistance from the Center for Multicultural Health or submit concerns about Utah Department of Health practices or policies which do not promote inclusiveness and the elimination of health disparities.	CMH, April	CMH records and responds to requests for assistance and descriptions of concerns	September, 2006 through August, 2010
b) The Center for Multicultural Health will conduct an annual needs assessment of health disparities and the cultural competence of the Utah Department of Health programs.	CMH, Dulce	CMH provides cultural competence-related technical support and training to the Utah Department of Health programs based on needs assessment	December 2006 through August, 2010
c) Hold regular meetings of the Health Disparities Work Group.	CMH, Owen	CMH records and responds to the Utah Department of Health needs for inclusion and cultural competence; CMH more effectively administers multicultural health resources and activities	February 2006-August 2010
i) At each monthly meeting, the Center for Multicultural Health will offer Work Group members time to discuss inclusion, cultural competence, and health disparity issues that the Center for Multicultural Health or the Utah Department of Health management need to address.			
ii) Coordinate and collaborate on multicultural health efforts (e.g., share and inform about resources, participate in shared research and outreach projects, share networks, inform about events).			
d) Meet with programs individually to help them with needs and projects related to health disparities and cultural competence.	CMH /the Utah Department of Health programs	Programs receive professional consultation to help them address health disparities	September 2006 –August 2010

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e) The Center for Multicultural Health or a representative of the Ethnic Health Advisory Committee (EHAC) will participate in the Utah Department of Health program networks and committees.	CMH, all staff	Ethnic health needs are continually addressed by the Utah Department of Health programs	September 2005-August 2010
2) Improve communication between the Multicultural Health Network (MHN), community-based organizations and the Utah Department of Health.			
a) The Center for Multicultural Health will contract with an outside agency to establish the Multicultural Health Network, which will create and implement plans to improve ethnic and racial minority health status, improve access to healthcare in Utah, and eliminate health disparities among racial and ethnic minority groups in Utah.	CMH/the Utah Department of Health programs, Owen/Dulce	Public and private sectors and Community-based organizations jointly create and implement plans to eliminate racial/ethnic health disparities	December 2005- August 2010
i) Involve public sector, private sector, community-based organizations, and grassroots advocates.			
ii) Invite existing program networks to incorporate their networks into the large network and their plans as part of the large plan (Tobacco, Cancer, other?)			
b) Conduct an annual or biennial summit to address health disparities and bring to the table decision-makers from the private and public sectors and community-based organizations.	CMH/the Utah Department of Health programs, Owen/Dulce	Public and private sectors and Community-based organizations jointly create and implement plans to eliminate racial/ethnic health disparities	December 2005- August 2010
c) Collaborate with the Utah Department of Health to create an action plan based on outcomes from the Multicultural Health Summits.	Owen/Dulce		
d) Provide links and contact information for community-based organizations that serve ethnic groups on the Center for Multicultural Health website.	CMH/the Utah Department of Health programs, April	Public and private sectors and Community-based organizations jointly create and implement plans to eliminate racial/ethnic health disparities	December 2005- August 2010
e) Offer through the Center for Multicultural Health website opportunities to the Utah Department of Health staff to participate in health committees of community-based organizations.	CMH, April	the Utah Department of Health staff participate directly with Community-based organizations that serve ethnic health needs	August 2006-2010

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3) Improve communication between the Ethnic Health Advisory Committee (EHAC) and the Utah Department of Health.			
a) The Ethnic Health Advisory Committee Executive Committee will invite speakers from the Utah Department of Health to speak on topics of interest to the Ethnic Health Advisory Committee.	CMH/the Utah Department of Health programs, Owen	the Utah Department of Health programs present their activities to the Ethnic Health Advisory Committee and receive feedback relating to ethnic/racial health interventions	July 2006-August 2010
b) Utah Department of Health programs that wish to present at Ethnic Health Advisory Committee meetings should contact the Center for Multicultural Health at least one month prior to the next meeting.	CMH/the Utah Department of Health programs, Owen	the Ethnic Health Advisory Committee receives frequent, ongoing communication from the Utah Department of Health programs related to activities that ethnic/racial health and provides recommendations for enhancement/improvement	August 2006-2010
i) The Center for Multicultural Health will request the Executive Committee to include the presentation on its agenda.	Owen		
ii) The Center for Multicultural Health will provide guidelines for presentations to prospective the Utah Department of Health presenters.	Owen		
c) Send Utah Department of Health programs the Ethnic Health Advisory Committee meeting minutes, action items, and recommendations by e-mail (WEBSITE) in a timely manner once approved by the Ethnic Health Advisory Committee Executive Committee.	CMH, New FTE	the Utah Department of Health programs utilize the Ethnic Health Advisory Committee information to improve effectiveness of their programs	August 2006-2010
d) Utah Department of Health program managers may provide a written response to Ethnic Health Advisory Committee recommendations.	CMH, New FTE	More frequent, program-specific dialogue between the Ethnic Health Advisory Committee and the Utah Department of Health	August 2006-2010

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e) Utah Department of Health programs may make announcements to the Ethnic Health Advisory Committee by submitting e-mails to the Center for Multicultural Health listserv, such as grant opportunities, trainings, news releases and job opportunities.	CMH, April	Other the Utah Department of Health programs and the Ethnic Health Advisory Committee remain abreast of ethnic/racial health improvement efforts; the Ethnic Health Advisory Committee disseminates information to Community-based organizations or other community stakeholders	September 2006 –August 2010
f) Create an annual report of Ethnic Health Advisory Committee recommendations and action items. The report will be posted on the Center for Multicultural Health website and distributed to the Utah Department of Health management.	CMH, Owen	Documentation, organization, and dissemination of the Ethnic Health Advisory Committee activities and recommendations to the Utah Department of Health programs	August 2006-2010
PART II: CULTURAL COMPETENCE, MINORITY REPRESENTATION & TECHNICAL ASSISTANCE			
4) Increase representation of minority groups on the Utah Department of Health Advisory Committees, networks and staff.			
a) Create a form available on the Center for Multicultural Health website for people outside the Utah Department of Health to express their interest in service and upload resumes.	CMH, April	Increase minority representation in health committees	September, 2006
b) Create a form for Utah Department of Health programs to submit requests for help locating ethnic committee members, volunteers and interns.	CMH/HDWG programs, April	Increase minority representation in health committees	September, 2006
a. Include the qualifications they are looking for.			
c) Create a form available on the Center for Multicultural Health website for the Utah Department of Health programs to briefly describe their programs and their health committees: purpose, number of members, meeting schedule, etc.	CMH/HDWG programs, Dulce	Increase minority representation in health committees	September, 2006
a. The Center for Multicultural Health will be in charge of creating the form and Utah Department of Health programs will be in charge of filling out the forms.			

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d) Advertise the need for ethnic committee members on Utah Department of Health program committees at the Multicultural Health Network (MHN) events and invite prospective members to fill out interest forms.	CMH/the Multicultural Health Network, Owen/Dulce	Increase minority representation in health committees	September 2006 -2010
e) Create a list of health committees working with different Utah Department of Health programs such as Asthma, Cancer Control and Prevention, Heart Disease and Stroke Prevention, Diabetes, HIV/AIDS, Immunization, Reproductive Health, Oral Health, Tobacco Control and Prevention, ACCESS (CHIP, PCN, Medicaid), and Children with Special Healthcare Needs (CSHCN).	CMH/the Utah Department of Health programs/the Multicultural Health Network, Owen	Assess the actual representation of the ethnic community in health committees	August 2006-2010
f) Meet with community-based organizations (CBOs) to learn how they want be involved in these committees.	CMH, Dulce/Owen	Evaluate the level of interest and participation. Attract new members	December, 2006
g) By 2008, the Center for Multicultural Health will convene a task force with Human Resources (HR) and Utah Department of Health programs to develop plans for creating a diverse workforce and then implement plans by 2009.	CMH/the Utah Department of Health programs/HR, Owen	Increase the Utah Department of Health qualified diversity workforce	January 2008-2010
5) Improve knowledge and awareness of cultural competence and health disparities among the Utah Department of Health management and employees.			
a) Post news, links and resources about cultural competence issues to the Center for Multicultural Health website.	CMH/the Utah Department of Health programs, April, Dulce	Facilitate cultural competence (CC) information and resources among the Utah Department of Health staff	July 2006 - 2010
b) Send regular announcements to the Center for Multicultural Health listserv of new web postings.	CMH, April	Facilitate cultural competence information and resources among the Utah Department of Health staff	July 2006 - 2010
c) Organize an annual multicultural health conference for the Utah Department of Health and local health departments.	Conference Planning Committee: CMH, the Utah Department of Health, and local health department, All staff	Increase CC among the Utah Department of Health staff. Share resources with local health departments	June 2007 - 2010

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d) Conduct trainings or presentations to Utah Department of Health programs.	CMH/Community-based organizations, Owen/Dulce	Increase CC among the Utah Department of Health staff	July 2006-2010
i) These presentations will be conducted either by the Center for Multicultural Health staff or expert members of the ethnic community.			
ii) The purpose of these trainings and presentations would be to increase knowledge about different topics regarding cultural competence.			
iii) Topics may include communicating between cultures, patterns of communication in different cultures, biases and prejudices, understanding our differences, etc.			
e) Conduct a general 1-hour training twice a year for Utah Department of Health staff. The purpose of this training would be to increase cultural awareness and sensitivity among Utah Department of Health personnel.	CMH/EDO/HR, Owen/Dulce	Increase CC among the Utah Department of Health staff	May 2007-2010
i) Contact EDO and Human Resources to see how feasible the implementation of this training is. The training could be “mandatory” (first option) or “strongly recommended” (second option).			
f) Individual programs may submit requests for the Center for Multicultural Health to present at their own trainings and meetings.	CMH/the Utah Department of Health programs, Dulce	Increase CC among the Utah Department of Health staff	August 2006-2010
i) The Center for Multicultural Health may present or may help the program find another knowledgeable person to present.			
6) Provide technical assistance to community-based organizations, ethnic members of the community and Utah Department of Health programs.			
a) Training topics to community-based organizations may include:	CMH/ the Utah Department of Health programs, All staff	Increase collaboration among the Utah Department of Health and Community-based organizations.	July 2006-2010
i) Grant writing resources and processes			
ii) Disease prevention			
iii) Public Health 101			
iv) Orientation packages from different programs			

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b) Identify a training to help Utah Department of Health programs in the process of recruiting and maintaining network and committee members (ask Tobacco Prevention and Control Program about training resources such as Praxis).	CMH, Dulce	Recruit and maintain ethnic networks	September 2007-2010
PART III: TRANSLATION AND INTERPRETATION SERVICES			
7) Improve translation and cultural appropriateness of written health materials at the Utah Department of Health.			
a) The Center for Multicultural Health will conduct a needs assessment of Utah Department of Health programs.	CMH, New FTE	Protocols and standards for translated materials	December, 2006
b) The Center for Multicultural Health will develop a database of the translated materials available in certain priority Utah Department of Health programs and local health departments.	CMH, Dulce/New FTE	Consistency in translation	September, 2006
i) If feasible, this database will be expanded in the future to other programs.			
c) The Center for Multicultural Health will develop standards to evaluate written translation products and translation vendors and to regulate translation protocols at the Utah Department of Health.	CMH, New FTE	Protocols and standards for translated materials	February, 2007
i) These standards will be established according to national standards and expert advice.	CMH	Increase translation services	Starting Dec. ,2006
ii) The standards will be available on the Center for Multicultural Health website.			
d) The Center for Multicultural Health will compile a glossary of English names and terms and their official translation in different foreign languages [e.g. The Utah Department of Health = El Departamento de Salud de Utah (in Spanish)].	CMH/ U of U Eccles Science Library, New FTE/All Staff	Facilitate access to translated materials. Share resources with local health departments	May 2006-2008
i) Require contracted vendors and the Utah Department of Health programs to use these terms as part of the standards.			
e) The Center for Multicultural Health and Utah Department of health programs will evaluate health materials for cultural and linguistic competence based on the standards established.	CMH, New FTE		
f) Utah Department of Health programs will share funding for translation and cultural competence review of materials to take advantage of economies of scale.	CMH /the Utah Department of Health programs, New FTE	Reduce cost	Jan. 2007 - 2010

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g) The Center for Multicultural Health will create a Request For Proposal to invite the public, in Utah and nationally, to apply as approved translation vendors.	CMH, Owen/New FTE	Facilitate access to qualified translation vendors	Feb.2007-2010
i) Ask Utah Department of Health programs to submit names of translation vendors they are currently using or have used successfully in the past. Invite these vendors to apply as approved translation vendors.			
ii) The Center for Multicultural Health will evaluate vendors based on price, cultural competency, quality, accuracy, the involvement of qualified native speakers in the translation process and adherence to the standards.	CMH, All Staff	Facilitate access to qualified translation vendors	Jan. 2007-2010
iii) The Center for Multicultural Health will create a list of approved vendors.	CMH	Facilitate access to qualified translation vendors	Jan. 2007-2010
iv) The Center for Multicultural Health will provide that list to the Division of Finance.			
v) The Center for Multicultural Health will collaborate with the Executive Directors Office and the Division of Finance to ensure that the Utah Department of Health only contracts with approved vendors.	CMH/EDO/Finance	Facilitate access to qualified translation vendors	March 2007-2010
h) The Center for Multicultural Health will conduct focus groups as needed with native speakers of different dialects and educational levels to ensure readability and cultural appropriateness of all products translated.	CMH/the Utah Department of Health programs, New FTE	Ensure readability and cultural appropriateness	October 2006-2010
i) Qualified participants will be found among community-based organizations (CBOs), public and private health agencies, colleges, schools, and the ethnic community in general.			
i) Seek additional existing, multilingual national resources that can be purchased or adapted for use in Utah. Evaluate them based on the standards.	CMH, New FTE		
8) Improve interpretation services at the Utah Department of Health.			
a) The Center for Multicultural Health will identify a protocol for responding to callers of different languages.	CMH/the Utah Department of Health programs, New FTE	Protocol to respond to LEP callers	October, 2006

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i) Meet with different programs such as Check Your Health/Baby Your Baby and Cancer Control to find out how they respond to low English proficiency (LEP) callers.			
ii) Learn how other programs can take advantage of telephonic interpretation services. Advertise these services and train program managers.	CMH/the Utah Department of Health programs	Better services for LEP callers	November, 2007-2010
iii) Use spot checks to ensure that materials in languages other than English with contact phone numbers lead to people who can respond in that language.	CMH	Better services for LEP callers	September 2006-2010
b) Facilitate interpretation at Utah Department of Health meetings and events.	CMH, New FTE	Facilitate interpretation and communication at events	July 2008-2010
i) Seek funding for transmitter equipment for interpretation at Utah Department of Health meetings and trainings.	CMH	Facilitate interpretation and communication at events	July 2008-2010
ii) Create and update annually a list of bilingual people trained in medical interpretation.	CMH/ Refugee Program	Facilitate interpretation and communication at events	October 2006
iii) Seek funding to pay for interpretation services at events.			
9. Support bilingual employees.			
a) Offer training in interpretation for bilingual employees who want to offer assistance with interpretation services. Update annually the list of bilingual and multilingual employees who are trained and want to offer assistance with interpretation services (spoken language).	CMH/ Refugee Program, New FTE	Support bilingual employees	October 2006
b) Offer the opportunity to bilingual employees to become independent contractors that could work as certified translators for the Utah Department of Health. Update annually the list of bilingual and multilingual employees who want to offer assistance with translation services (written materials).	OED, New FTE	Support bilingual employees	January 2008
c) Offer improved compensation for trained bilingual employees. Verbal and written proficiency in the a foreign language needs to be demonstrated.	OED, New FTE	Support bilingual employees	January 2008
d) Provide a list of official Spanish and other foreign language terms and names to bilingual employees through the Center for Multicultural Health website.	CMH, NP, April	Support bilingual employees	March, 2007

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e) Make "I speak" cards and other resources available through the Center for Multicultural Health website.	CMH, NP, April	Support bilingual employees	March 2007
PART IV: DATA			
10) Gather more reliable racial and ethnic data and ensure that existing data are utilized.			
a) The Utah Department of Health will produce reports that inform about Utah racial and ethnic groups.	CMH/ the Utah Department of Health Programs/ Contractor,	Dissemination of information	June 2006-2010
i) The Center for Multicultural Health will hire a contractor to conduct a qualitative Health Status by Race and Ethnicity report in collaboration with the Utah Department of Health programs once every 5 years (next time 2007).	CMH/ the Utah Department of Health Programs/ Contractor, Owen, April	Report completed	December 2007
ii) OPHA, in collaboration with other programs, will update the quantitative Health Status by Race and Ethnicity report every 5 years (next time 2010).	OPHA / CMH/ the Utah Department of Health Programs, April	Report completed	December 2010
iii) The Center for Multicultural Health will produce a fact sheet every 12 months to assess quantitative progress on health disparities according to Healthy People 2010 goals and post it to the Center for Multicultural Health website.	CMH, April	Fact sheet completed	Every October, beginning 2006
iv) The Center for Multicultural Health will locate or create reports or fact sheets about the distribution, composition, projected growth, health status and history of Utah ethnic and racial minority groups and post them to the Center for Multicultural Health website.	CMH, April	Fact sheet completed	March 2007
b) Encourage all the Utah Department of Health data sources to include race and ethnicity.	CMH/ the Utah Department of Health programs	Availability of information	June 2006-2010
i) Promote federal standards for collecting data on race and ethnicity (e.g., race should be determined by self-report).	CMH/ the Utah Department of Health programs, April	Availability of information	June 2006-2010
ii) Investigate the need to create and promote additional Utah standards (e.g., collecting data on subgroups such as Tongans when feasible).	CMH, April	Data sources contain racial and ethnic information	January 2008
iii) Educate healthcare organizations on the purpose, ethics and legality of collecting racial and ethnic data.	CMH, April	Data sources contain racial and ethnic information	June 2006-2010

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iv) The Center for Multicultural Health and Utah Department of Health researchers will identify topics for which data exist but have not yet been analyzed by race and ethnicity and determine where such analysis would be useful (e.g. BRFSS, mental health, diabetes education, hospital discharge pre-transport deaths, etc.).	CMH/ the Utah Department of Health programs	Analyzed racial and ethnic information	March 2008
v) The Center for Multicultural Health and Utah Department of Health researchers will develop protocols for sharing less than ideal data (e.g., data that have low response rates for some groups).	CMH/ the Utah Department of Health programs, April	Analyzed racial and ethnic information	March 2008
c) The Center for Multicultural Health will coordinate efforts to collect surveillance data about ethnic and racial groups among the Utah Department of Health programs.	CMH/the Utah Department of Health programs	Department-wide cooperation to obtain racial and ethnic data	June 2006-2010
i) The Center for Multicultural Health will participate in the Utah Department of Health data workgroups, including SEED, MCH Epi group and the Utah State Health Surveys Advisory Committee.	CMH, April, Owen	Communication about data issues	June 2006-2010
ii) The Utah Department of Health research consultants will inform the Center for Multicultural Health of new data projects that investigate multicultural issues.	the Utah Department of Health Programs, April	Communication about data issues	June 2006-2010
iii) When requested by the Utah Department of Health programs, the Center for Multicultural Health will serve as a consultant for locally-based surveys to evaluate questions for cultural and linguistic competence, seeking input from community members as appropriate.	CMH, Dulce	Improved validity of ethnic and racial data	June 2007-2010
iv) The Center for Multicultural Health will communicate with programs to find out about data needs that overlap across programs and opportunities for pooling resources and/or seeking funding for special data projects.	CMH/the Utah Department of Health programs, April	Potential for collaboration	June 2007-2010
v) Investigate the need for pooled funding for oversampling by race/ethnicity on shared data sources such as BRFSS (e.g., Pacific Islanders).	CMH/the Utah Department of Health programs, April	Potential for collaboration	June 2007-2010
vi) Investigate the need for door-to-door surveillance for populations that have a high proportion of residents without home telephones (e.g., Native Americans and people who use cell phones only).	CMH/the Utah Department of Health programs, April	Potential for collaboration	June 2007-2010
vii) Investigate the need for special surveys among low literacy or low English proficiency groups such as immigrants.	CMH/the Utah Department of Health programs, April	Potential for collaboration	June 2007-2010

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viii) The Center for Multicultural Health will seek funding sources for oversampling and/or additional surveys to ethnic and racial groups using varied methodologies as needed.	CMH/the Utah Department of Health programs, Owen	Funding for data collection	June 2007-2010
d) The Center for Multicultural Health will encourage members of ethnic and racial minority groups to participate in health research and surveillance.	CMH/the Utah Department of Health programs	Improved participation in and validity of ethnic and racial data	April 2007-2010
i) The Center for Multicultural Health will seek input from ethnic and racial minorities about the kinds of data they need and barriers to participating in existing surveillance efforts or using existing data products.	CMH, April, Owen	Improved participation in and validity of ethnic and racial data	April 2007
ii) The Center for Multicultural Health will encourage ethnic and racial minorities to participate in surveillance surveys by informing ethnic groups about the legitimacy and confidentiality of the Utah Department of Health data collection projects and help Utah Department of Health researchers address barriers to participation.	CMH, April	Improved participation in and validity of ethnic and racial data	July 2007-2010
iii) The Center for Multicultural Health will advertise University efforts to conduct research studies among racial and ethnic populations in Utah.	CMH, April	Improved participation in and validity of ethnic and racial data	November 2007-2010
iv) The Center for Multicultural Health will help the Utah Department of Health programs seek input from the Ethnic Health Advisory Committee and other ethnic and racial minority groups about possible interpretations for data results (e.g., what barriers may be causing members of your ethnic group to have a lower rate of seeking prenatal care than members of other populations?)	CMH/the Utah Department of Health programs, April	Improved participation in and validity of ethnic and racial data	July 2007-2010
e) Improve utilization of ethnic and racial health data.	CMH/the Utah Department of Health programs	Greater awareness and usefulness of data	June 2006-2010
i) The Center for Multicultural Health will summarize and advertise data results about ethnic populations through the Center for Multicultural Health website and listserv and through radio, television and print media.	CMH, April, Owen	Summaries and advertisements	October 2006-2010
ii) Individual Utah Department of Health programs will include goals and methods to reduce ethnic disparities in their program strategic plans (e.g., since Blacks/African Americans have higher tobacco use rates, the Tobacco program should incorporate goals and methods to reduce this disparity in their own strategic plan).	the Utah Department of Health Programs, all staff	Goals and objectives in strategic plans	August 2008

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iii) The Center for Multicultural Health will help government and community-based organizations that serve ethnic and racial minority groups to access existing data sources needed for grant-writing, funding justification and outreach.	CMH, Dulce, April	Improved products of government and community-based organizations	June 2006-2010
f) In partnership with OPHA, the Center for Multicultural Health will offer training in IBIS usage to the Utah Department of Health employees and community-based organizations.	CMH, Dulce, April	Improved products of government and community-based organizations	June 2006-2010